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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture	Sofia First name A. Middle name	First name Middle name	
	identification to your meeting with the trustee.	Cchoa Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you have used in the last 8 years	Sofia Ochoa-Villarruel		
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7087		

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Case number (if known)

Debtor 1 Sofia A. Ochoa

		About Debtor 1:	ļ	About Debtor 2 (Spouse Only in a Joint Case):			
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.		☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)				
		EINs	E	EINs			
5.	Where you live		ŀ	f Debtor 2 lives at a different address:			
		3036 Jacqueline Court, Apt. 6 Rockford, IL 61109					
		Number, Street, City, State & ZIP Code	١	mber, Street, City, State & ZIP Code			
		Winnebago					
		County	County				
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	i	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	١	Number, P.O. Box, Street, City, State & ZIP Code			
ò.	Why you are choosing this district to file for	Check one:	(Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Case number (if known) Debtor 1 Sofia A. Ochoa

ar	t 2: Tell the Court About	Your E	Bankruptcy Ca	ise					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	■ C	hapter 7						
			hapter 11						
			hapter 12						
			hapter 13						
3.	How you will pay the fee		about how yo	u may pay. Typica attorney is submit	ally, if you are paying the fee yo	k with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with			
					Iments. If you choose this optic Official Form 103A).	on, sign and attach the Application for Individuals to Pay			
			but is not req applies to you	uired to, waive your family size and	ur fee, and may do so only if yo you are unable to pay the fee ir	n only if you are filing for Chapter 7. By law, a judge may, ur income is less than 150% of the official poverty line that a installments). If you choose this option, you must fill out cial Form 103B) and file it with your petition.			
.	Have you filed for								
•	bankruptcy within the	■ N							
	last 8 years?	☐ Ye			M/L	Occasional de la companya del companya de la companya del companya de la companya			
			District		When When	Case number	_		
			District District		when When	Case number Case number	-		
			District	-	wildii	Case Hullibel	_		
10.	Are any bankruptcy	■ N	0				_		
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	es.						
	anniate:		Debtor			Relationship to you			
			District		When	Case number, if known	_		
			Debtor			Relationship to you			
			District		When	Case number, if known			
11.	Do you rent your residence?	□ N	o. Go to I	ine 12.					
	residence:	■ Ye	es. Has yo	ur landlord obtain	ed an eviction judgment agains	t you and do you want to stay in your residence?			
				No. Go to line 12					
				Yes. Fill out <i>Initia</i> bankruptcy petition		Judgment Against You (Form 101A) and file it with this			

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Desc Main Document Page 4 of 55 Case number (if known) Debtor 1 Sofia A. Ochoa Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes.

of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Sofia A. Ochoa Document Page 5 of 55

Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 1 Sofia A. Ochoa		Document	Paye 0 01 3	Case number	(if known)			
Part	6: Answer These Quest	ions for R	eporting Purposes						
16.	What kind of debts do you have?	16a.	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred be individual primarily for a personal, family, or household purpose."						
			☐ No. Go to line 16b.						
			■ Yes. Go to line 17.						
		16b.	Are your debts primarily busin money for a business or investm						
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you owe	that are not consume	r debts or business	debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. (Go to line 18.					
	Do you estimate that after any exempt property is excluded and	■ Yes.	are paid that funds will be availal			ty is excluded and administrative expenses			
	administrative expenses are paid that funds will		No						
	be available for distribution to unsecured creditors?		☐ Yes						
18.	How many Creditors do	1 -49		1 ,000-5,000		□ 25,001-50,000			
	you estimate that you owe?	□ 50-99		☐ 5001-10,000		50,001-100,000			
		□ 100-199 □ 10,001-25,000 □ More than100,000 □ 200-999							
19.	How much do you	\$ 0 - \$	550,000	□ \$1,000,001 - \$ ²	10 million	☐ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?	□ \$50,0	01 - \$100,000	\$10,000,001 - \$		□ \$1,000,000,001 - \$10 billion			
			,001 - \$500,000 ,001 - \$1 million	□ \$50,000,001 - \$ □ \$100,000,001 -	•	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
20.	How much do you	\$ 0 - \$	550,000	□ \$1,000,001 - \$	10 million	☐ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$ □ \$50,000,001 - \$		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion			
			,001 - \$500,000 ,001 - \$1 million	□ \$100,000,001 - 3		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
		ш фооо,	- φτ minion		<u> </u>	<u> </u>			
Part	5								
For	you	I have ex	kamined this petition, and I declare	e under penalty of per	jury that the informa	ation provided is true and correct.			
			chosen to file under Chapter 7, I a tates Code. I understand the relief			nder Chapter 7, 11,12, or 13 of title 11, ose to proceed under Chapter 7.			
			rney represents me and I did not p nt, I have obtained and read the no			an attorney to help me fill out this			
		I request	relief in accordance with the chap	oter of title 11, United	States Code, specif	ied in this petition.			
		bankrupt and 357	tcy case can result in fines up to \$2 1.			property by fraud in connection with a ars, or both. 18 U.S.C. §§ 152, 1341, 1519			
		Sofia A	a A. Ochoa Ochoa e of Debtor 1	S	Signature of Debtor 2	2			
		Executed	d on June 9, 2017	E	executed on	DD / YYYY			

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Debtor 1 Sofia A. Ochoa Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Jason H. Rock Signature of Attorney for Debtor	Date	June 9, 2017 MM / DD / YYYY
,		WWW/DD/TTTT
Jason H. Rock		
Printed name		
BARRICK SWITZER LAW OFFICE		
Firm name		
6833 Stalter Drive		
Rockford, IL 61108		
Number, Street, City, State & ZIP Code		
Contact phone	Email address	
Bar number & State		

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					Case Hullibe	of (II Known)			
Pai	t 6: Answer These Quest	tions for R	eporting Purposes						
16.	What kind of debts do you have?	16a.	individual primarily for a personal, family, or household purpose."						
			No. Go to line 16b.						
		16b.	Yes. Go to line 17.	husinaan dahta 2 Dusi					
		TOD.	Are your debts primarily money for a business or inv	vestment or through the	<i>iness debts</i> are debts e operation of the bus	that you incurred to obtain iness or investment.			
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you	owe that are not consu	umer debts or busines	es debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.					
	Do you estimate that after any exempt property is excluded and	Yes.	I am filing under Chapter 7. are paid that funds will be a	Do you estimate that a vailable to distribute to	after any exempt prop unsecured creditors?	erty is excluded and administrative expense?			
	administrative expenses are paid that funds will		■ No						
	be available for distribution to unsecured creditors?		☐ Yes						
18.	How many Creditors do you estimate that you	■ 1-49 □ 50-99		☐ 1,000-5,000 ☐ 5001-10,00		25,001-50,000			
	owe?	☐ 100-19 ☐ 200-99	_	☐ 10,001-25,0		☐ 50,001-100,000 ☐ More than100,000			
19.	How much do you estimate your assets to	= \$0 - \$5		\$1,000,001		☐ \$500,000,001 - \$1 billion			
	be worth?	□ \$50,001 - \$100,000 □ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$50,000,00	1 - \$50 million 1 - \$100 million 01 - \$500 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
20.	How much do you estimate your liabilities	\$0 - \$5		☐ \$1,000,001		☐ \$500,000,001 - \$1 billion			
	to be?	_	01 - \$100,000 001 - \$500,000		1 - \$50 million 1 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
		□ \$500,001 - \$1 million			01 - \$500 million	☐ More than \$50 billion			
Part	7: Sign Below								
For	you	I have exa	amined this petition, and I de	clare under penalty of	perjury that the inform	nation provided is true and correct.			
		If I have of United Sta	hosen to file under Chapter ates Code. I understand the	7, I am aware that I ma relief available under e	y proceed, if eligible, ach chapter, and I ch	under Chapter 7, 11,12, or 13 of title 11, oose to proceed under Chapter 7.			
		If no attori document	ney represents me and I did , I have obtained and read th	not pay or agree to pay ne notice required by 1	y someone who is not 1 U.S.C. § 342(b).	an attorney to help me fill out this			
		I request r	elief in accordance with the	chapter of title 11, Unit	ed States Code, spec	sified in this petition.			
		l understa bankrupto and 3571. Sofia A.	y case can result in fines up	, concealing property, to \$250,000, or imprise	or obtaining money or onment for up to 20 ye Signature of Debtor	r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,			
			of Debtor 1		Executed on	/ DD / YYYY			

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Fill in this inform	nation to identify your	case:			
Debtor 1	Sofia A. Ochoa				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				Check if this is an	
				amended filing	
Official Form	106Dec				
Declarati	ion About a	n Individual	Debtor's Sch	edules	12/15
	*				
f two married pe	ople are filing togethe	r, both are equally respor	nsible for supplying correc	t information.	
				aking a false statement, concealing property,	
	or property by fraud i 3 U.S.C. §§ 152, 1341, 1		ruptcy case can result in fi	ines up to \$250,000, or imprisonment for up to	o 20
•		,			
TE SEE SERVICE					
Sign	Below				
Did you pay	or agree to hav some	one who is NOT an attor	ney to help you fill out ban	kruntcy forms?	
Dia you pay	or agree to pay some		noy to help you in out buil	maptoy forms.	
■ No					
☐ Yes. N	ame of person			Attach Bankruptcy Petition Preparer's No	
				Declaration, and Signature (Official Form	119)
	31				
	ty of perjury declare true and correct.	that I have read the sum	mary and schedules filed w	vith this declaration and	
X Sofia A	. Ochoa		X Signature of De	htor 2	-
	e of Deptor 1		Signature of De	DIOI 2	
Data 1	0. 0047		Data		
Date J	une 9, 2017		Date		

Page 10 of 55 number (if known) Document Debtor 1 Sofia A. Ochoa No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business Employer Identification number Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sofia A. Ochoa Signature of Debtor 2 Signature of Debtor 1 Date June 9, 2017 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debtor 1	Sofia A. Ochoa	Case number (if kg	nown)
name:		☐ Retain the property and redeem it.☐ Retain the property and enter into a	☐ Yes
Descrip	tion of	Reaffirmation Agreement.	
propert		Retain the property and [explain]:	
securin	g debt:	hard and farming	77.7
Part 2:	List Your Unexpired Personal Prope	rty Leases	
in the into	rmation below. Do not list real estate	t you listed in Schedule G: Executory Contracts and Unexeleases. Unexpired leases are leases that are still in effectivity lease if the trustee does not assume it. 11 U.S.C. § 365	to the lease period has not yet anded
Describe	your unexpired personal property lea	ases	Will the lease be assumed?
Lessor's n	ame:		□ No
	n of leased		□ No
Property:			☐ Yes
Lessor's n			□ No
Description Property:	n of leased		_
. Toporty.			☐ Yes
Lessor's na			□ No
Description Property:	n of leased		
r roperty.			☐ Yes
Lessor's na			□ No
Description Property:	of leased		
			☐ Yes
Lessor's na			□ No
Description Property:	or leased		
			☐ Yes
Lessor's na			□ No
Descriptior Property:	lorleased		☐ Yes
			□ Yes
Lessor's na Description			□ No
Property:	- 01 154554		☐ Yes
Part 3:	Sign Below		
Inder pena	alty of perjury, declare that I have in at is subject to an unexpired lease.	dicated my intention about any property of my estate that	secures a debt and any personal
X	at is subject to all unexpired lease.	X	
Sofia	A. Ochoa	Signature of Debtor 2	
	ture of Debtor 1		
Date	June 9, 2017	Date	

	Case 11-01300	DOC T	LIIEU OOLOSITI	FILE 160 00/03/11 10:10:21	Desc Mail
			Document	Page 12 of 55	
ebtor 1	Sofia A. Ochoa			Case number (if known)	

					Column A Debtor 1		Colum Debto non-fi	r 2 or		
8.	Unemployment compensation				\$	0.00	\$	iiig 3	pouse	
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	t received was a ber	nefit un	der	·	0.00				
	For you\$	3	0.00							
	For your spouse \$									
9.	Pension or retirement income. Do not include any an benefit under the Social Security Act.	mount received that v	vas a		\$	0.00	\$			
10	Income from all other sources not listed above. Spe Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hur domestic terrorism. If necessary, list other sources on a total below.	Security Act or paymemanity, or internation	ents al or							
	Link benefits				\$	348.00	\$			
					\$	0.00	\$			
	Total amounts from separate pages, if any.			+	\$	0.00	\$			
11.	Calculate your total current monthly income. Add lir each column. Then add the total for Column A to the to	nes 2 through 10 for tal for Column B.	\$_		2,260.99	+ \$			= \$	2,260.99
										current monthly
Pari	2: Determine Whether the Means Test Applies t	o You							incor	ne
12.	Calculate your current monthly income for the year	. Follow these steps:								
	12a. Copy your total current monthly income from line	11			Сор	y line 11	here=>		\$	2,260.99
	Multiply by 12 (the number of months in a year)								X	12
	12b. The result is your annual income for this part of the	e form						12b.	\$	27,131.88
13.	Calculate the median family income that applies to	vou. Follow these st	eps:							
	Fill in the state in which you live.	IL								
	This tile state in which you live.	11-								
	Fill in the number of people in your household.	3								
	Fill in the median family income for your state and size				************			13.	\$	76,406.00
	To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	online using the link ruptcy clerk's office.	specifi	ed	in the separ	ate instru	ctions			
14.	How do the lines compare?									
	14a. Line 12b is less than or equal to line 13. Of Go to Part 3.	n the top of page 1, o	check l	оох	1, There is	no presur	nption of	abuse.		
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box	2, The	pre	sumption of	f abuse is	determin	ed by	Form 1	22A-2.
art										
	By signing here, I declare under penalty of perjury	that the information	on this	sta	tement and	in any att	achments	s is tru	e and o	correct.
	Sofia A. Ochoa Signature of Debtor 1	<u> </u>								
	Date June 9, 2017									
	MM / DD / YYYY									
	If you checked line 14a, do NOT fill out or file Form	n 122A-2.								
	If you checked line 14b, fill out Form 122A-2 and fi	le it with this form.								

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United States Bankruptcy Court Northern District of Illinois

		Notthern District of Illinois		
In re	Sofia A. Ochoa	Debtor(s)	Case No. Chapter 7	
	VI	ERIFICATION OF CREDITOR M	IATRIX	
		Number of	Creditors:	12
	The above-named Debtor(s) (our) knowledge.) hereby verifies that the list of credit	tors is true and correct to t	he best of my
Date:	June 9, 2017	Sofia A. Ochoa Signature of Debtor	July 1	

		Docume	nt Page 14 of 55	
Fill in this infor	mation to identify your	case:		
Debtor 1	Sofia A. Ochoa			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as Value of	sets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	8,401.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	8,401.00
Par	t 2: Summarize Your Liabilities		
		Your lia Amount	bilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	28,576.21
	Your total liabilities	\$	28,576.21
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,548.31
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,121.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	edules.
7.	■ Yes What kind of debt do you have?		
	Your dahts are primarily consumer dahts. Consumer dahts are those "incurred by an individual primarily for		

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Page 15 of 55 Case number (if known) Debtor 1 Sofia A. Ochoa

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 2,260.99 \$ 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	ıim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

		Document	Page 16 of 55		
Fill in this in	formation to identify your case	e and this filing:			
Debtor 1	Sofia A. Ochoa				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the: NO	RTHERN DISTRICT OF ILL	INOIS		
Case number	·				☐ Check if this is an
					amended filing
Official I	Form 106A/B				
Sched	ule A/B: Proper	'tv			12/15
n each categor think it fits bes information. If Answer every o	ry, separately list and describe iter t. Be as complete and accurate as more space is needed, attach a se question.	ms. List an asset only once. If possible. If two married peop parate sheet to this form. On t	le are filing together, both ar he top of any additional page	re equally responsible for su	pplying correct
Part 1: Desci	ribe Each Residence, Building, Lar	nd, or Other Real Estate You O	wn or Have an Interest In		
1. Do you own	or have any legal or equitable inte	erest in any residence, building	g, land, or similar property?		
No. Go to	Part 2.				
☐ Yes. Whe	ere is the property?				
Part 2: Desci	ribe Your Vehicles				
_					
	lease, or have legal or equitab drives. If you lease a vehicle, al				hicles you own that
3 Care vans	s, trucks, tractors, sport utility	vehicles motorcycles	·	•	
J. Cars, varis	s, trucks, tractors, sport utility	vernicles, motorcycles			
□ No					
Yes					
3.1 Make:	Nissan	Who has an interest in t	he property? Check one	Do not deduct secured cla	aims or exemptions. Put
Model:	Pathfinder	Debtor 1 only	ne property? Check one	the amount of any secure Creditors Who Have Clair	
Year:	2002	Debtor 2 only		Current value of the	Current value of the
	imate mileage: 154,000		,	entire property?	portion you own?
	nformation: ondition, needs new alarm	At least one of the deb	otors and another		
syste	•	☐ Check if this is comm	nunity property	\$3,000.00	\$3,000.00
		(see instructions)			
	s, aircraft, motor homes, ATVs Boats, trailers, motors, personal				
	ollar value of the portion you on the portion you on the part 2. Write the part 2. Write the part 2. Write the part 2.				\$3,000.00
	ribe Your Personal and Household				
Do you own	or have any legal or equitable	interest in any of the follo	wing items?	! !	Current value of the cortion you own? Do not deduct secured claims or exemptions.
	d goods and furnishings : Major appliances, furniture, line	ne china kitchenwere			
∟xarripies.	. major apphances, futfiture, line	no, onna, ritolienware			

□ No
Official Form 106A/B Schedule A/B: Property page 1

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?

Document Page 18 of 55 Case number (if known) Debtor 1 Sofia A. Ochoa Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No ■ Yes..... Cash \$100.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. No Institution name: ☐ Yes..... 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: \$2,000.00 401(k) **Empower** 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

☐ Yes. Give specific information about them...

☐ Yes.....

De	ebtor 1	Case 17-81386 Sofia A. Ochoa	Doc 1	Filed 06/09/17 Document	Entered 06/09/17 10:16:3 Page 19 of 55 Case number (if knot	
						
26.		s, copyrights, trademarks, bles: Internet domain names				
	☐ Yes.	Give specific information al	bout them			
27.	Examp ■ No	es, franchises, and other ples: Building permits, exclusions Give specific information al	sive licenses,		n holdings, liquor licenses, professional lic	enses
		·	bout triciii			
M	oney or p	oroperty owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	_	unds owed to you				
	■ No □ Yes.	Give specific information ab	oout them, inc	luding whether you alre	ady filed the returns and the tax years	
29.	■ No			isal support, child suppo	ort, maintenance, divorce settlement, prop	erty settlement
30.	Examp ■ No	amounts someone owes y oles: Unpaid wages, disabilit benefits; unpaid loans Give specific information	ty insurance p		efits, sick pay, vacation pay, workers' con	pensation, Social Security
31.		ts in insurance policies ples: Health, disability, or life	e insurance; h	ealth savings account (HSA); credit, homeowner's, or renter's inst	urance
	■ Yes.	Name the insurance compa Comp	ny of each po pany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
			Dominion F rance/term	reight group term li	fe	\$1.00
32.	If you a someo	erest in property that is dare the beneficiary of a living ne has died. Give specific information			d surance policy, or are currently entitled to	receive property because
33.	Examp ■ No	oles: Accidents, employmen			t or made a demand for payment to sue	
2/		Describe each claim	ad claims of	every nature including	n counterclaims of the dobter and right	s to set off claims
34.	■ No	Describe each claim	eu Ciaillis Of (every nature, including	g counterclaims of the debtor and right	s to set on claims
35		ancial assets you did not	already list			
	■ No	Give specific information	,			

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Debto	Sofia A. Ochoa		Case number (if known)	
	Add the dollar value of all of your entries from Part 4, includition Part 4. Write that number here			\$2,101.00
Part 5	Describe Any Business-Related Property You Own or Have an Inte	erest In. List any real esta	ite in Part 1.	
37. Do	you own or have any legal or equitable interest in any business-rela	ated property?		
	lo. Go to Part 6.			
ΠY	es. Go to line 38.			
Part 6	Describe Any Farm- and Commercial Fishing-Related Property Yo If you own or have an interest in farmland, list it in Part 1.	ou Own or Have an Interes	st In.	
16. D o	o you own or have any legal or equitable interest in any farm	n- or commercial fishin	g-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7	Describe All Property You Own or Have an Interest in That Yo	ou Did Not List Above		
	you have other property of any kind you did not already list examples: Season tickets, country club membership	st?		
	Yes. Give specific information			
54. <i>i</i>	Add the dollar value of all of your entries from Part 7. Write t	hat number here		\$0.00
Part 8	List the Totals of Each Part of this Form			
55. I	Part 1: Total real estate, line 2			\$0.00
56. I	Part 2: Total vehicles, line 5	\$3,000.00		
57. I	Part 3: Total personal and household items, line 15	\$3,300.00		
58. I	Part 4: Total financial assets, line 36	\$2,101.00		
59. I	Part 5: Total business-related property, line 45	\$0.00		
60. I	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61. I	Part 7: Total other property not listed, line 54	+ \$0.00		
62.	Total personal property. Add lines 56 through 61	\$8,401.00	Copy personal property total	\$8,401.00

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$8,401.00

Fill in this infor	mation to identify your			
riii in this infor	rmation to identify your	case:		
Debtor 1	Sofia A. Ochoa			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	_
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemptio
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
2002 Nissan Pathfinder 154,000 miles Fair condition, needs new alarm	\$3,000.00		\$2,400.00	735 ILCS 5/12-1001(c)
system Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
2002 Nissan Pathfinder 154,000 miles Fair condition, needs new alarm	\$3,000.00		\$600.00	735 ILCS 5/12-1001(b)
system Line from <i>Schedule A/B</i> : 3.1			100% of fair market value, up to any applicable statutory limit	
Dining room set, 1 sectional couch, living room set, crib, 2 matresses,	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
and other random household articles Line from <i>Schedule A/B</i> : 6.1			100% of fair market value, up to any applicable statutory limit	
1 mobile phone, 2 TVs, 1 DVD player, PS3 gaiming system	\$600.00		\$600.00	735 ILCS 5/12-1001(b)
ine from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
Everyday clothes Line from Schedule A/B: 11.1	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(a)
Line hom conceane / v.b. 1111			100% of fair market value, up to any applicable statutory limit	

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Case number (if known)

De	JULIA A. OCTIOA					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	Assorted jewelry Line from Schedule A/B: 12.1	\$700.00		\$700.00	735 ILCS 5/12-1001(b)	
	Ellie II olii ochedale Al D. 1211			100% of fair market value, up to any applicable statutory limit		
	Cash Line from Schedule A/B: 16.1	\$100.00		\$100.00	735 ILCS 5/12-1001(b)	
	Line Holli Schedule AVB. 10.1			100% of fair market value, up to any applicable statutory limit		
	401(k): Empower Line from Schedule A/B: 21.1	\$2,000.00		\$2,000.00	735 ILCS 5/12-1006	
	Line Holli Schedule AVB. 21.1			100% of fair market value, up to any applicable statutory limit		
	Old Dominion Freight group term life insurance/term	\$1.00		\$1.00	735 ILCS 5/12-1001(f)	
	Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every S ■ No □ Yes. Did you acquire the property covered □ No	3 years after that for ca	ases fi	ŕ	,	
	☐ Yes					

Fill in this inform					
Debtor 1	Sofia A. Ochoa				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					Check if this is an
					amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

	OddC 17 01000 Do	Document	Page 24 of 55	7000 Main
Fill in	this information to identify your case			
Debto	or 1 Sofia A. Ochoa			
	First Name	Middle Name	Last Name	
Debto				
(Spouse	e if, filing) First Name	Middle Name	Last Name	
United	d States Bankruptcy Court for the:	ORTHERN DISTRICT OF ILI	LINOIS	
Case	number			
(if know	vn)			Check if this is an
				amended filing
Offic	cial Form 106E/F			
	edule E/F: Creditors Wh	o Have Unsecured	Claims	12/15
			Y claims and Part 2 for creditors with NONPRIORITY	
Schedu left. Att name a	ule D: Creditors Who Have Claims Secure tach the Continuation Page to this page. and case number (if known).	d by Property. If more space is if you have no information to rep	o not include any creditors with partially secured cla needed, copy the Part you need, fill it out, number th port in a Part, do not file that Part. On the top of any a	e entries in the boxes on the
Part 1				
_	o any creditors have priority unsecured c	laims against you?		
	No. Go to Part 2.			
	Yes.			
Part 2				
3. Do	o any creditors have nonpriority unsecur	ed claims against you?		
	f I No. You have nothing to report in this part.	Submit this form to the court with	your other schedules.	
	Yes.			
un tha	nsecured claim, list the creditor separately fo	r each claim. For each claim listed	e creditor who holds each claim. If a creditor has more i, identify what type of claim it is. Do not list claims alread have more than three nonpriority unsecured claims fill out	y included in Part 1. If more
				Total claim
4.1	American Profit Recovery	Last 4 digits of acc	ount number	\$507.24
	Nonpriority Creditor's Name			
	34505 W. 12 Mile Road, Suite 3 Farmington, MI 48331	333 When was the debt	incurred?	
	Number Street City State Zlp Code	As of the date you	file, the claim is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIOR	NTY unsecured claim:	
	☐ Check if this claim is for a commu	nity Student loans		
	debt		ng out of a separation agreement or divorce that you did r	not
	Is the claim subject to offset?	report as priority clai		
	■ No	•	or profit-sharing plans, and other similar debts	
	Yes	Other. Specify		

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Debtor 1 Sofia A. Ochoa Case number (if know) 4.2 \$643.97 **Convergence Acquisitions, LLC** Last 4 digits of account number Nonpriority Creditor's Name 5109 S. Broadband Lane When was the debt incurred? Sioux Falls, SD 57108-7960 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collector for Fifth Third Bank ☐ Yes 4.3 Convergent \$383.00 Last 4 digits of account number 7091 Nonpriority Creditor's Name 800 Sw 39th St When was the debt incurred? Opened 6/13/16 Renton, WA 98057 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify 11 Comcast ☐ Yes 4.4 Convergent Last 4 digits of account number 6348 \$206.00 Nonpriority Creditor's Name 800 Sw 39th St When was the debt incurred? Opened 5/23/14 Renton, WA 98057 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify 11 Comcast ☐ Yes

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Debtor 1 Sofia A. Ochoa Case number (if know) 4.5 \$214.00 **Convergent Healthcare** Last 4 digits of account number 8291 Nonpriority Creditor's Name 121 Ne Jefferson St When was the debt incurred? Opened 6/16/15 Peoria, IL 61602 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Cbo Osf ☐ Yes 4.6 **Convergent Healthcare** Last 4 digits of account number 2116 \$178.00 Nonpriority Creditor's Name 121 Ne Jefferson St When was the debt incurred? Opened 7/10/12 Peoria. IL 61602 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Cbo Osf Other, Specify 4.7 **Creditors Protection** Last 4 digits of account number 6026 \$402.00 Nonpriority Creditor's Name 206 W State St When was the debt incurred? Opened 1/18/16 Rockford, IL 61101 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Mercy Health** Other. Specify

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Debtor 1 Sofia A. Ochoa 4.8 **Creditors Protection** \$304.00 Last 4 digits of account number 4748 Nonpriority Creditor's Name 206 W State St When was the debt incurred? Opened 9/26/11 Rockford, IL 61101 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Uic College Of Medicine ☐ Yes 4.9 **Creditors Protection** Last 4 digits of account number 6220 \$301.00 Nonpriority Creditor's Name 206 W State St When was the debt incurred? Opened 3/28/16 Rockford, IL 61101 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Mercy Health 4.1 **Creditors Protection** 4369 \$201.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 206 W State St When was the debt incurred? Opened 5/16/16 Rockford, IL 61101 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Rkfd Health Physicians ☐ Yes

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Debtor 1 Sofia A. Ochoa Case number (if know) 4.1 \$508.00 **Debt Rec Sol** 6741 Last 4 digits of account number Nonpriority Creditor's Name 900 Merchants Concourse When was the debt incurred? Opened 11/22/16 Westbury, NY 11590 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Swedishamerican Hospital ☐ Yes 4.1 Erc 6796 \$729.00 Last 4 digits of account number Nonpriority Creditor's Name 8014 Bayberry Rd When was the debt incurred? Opened 4/11/16 Jacksonville, FL 32256 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Other. Specify 11 Tmobile ☐ Yes 4.1 **Mutual Mamt** 1440 \$1,264,00 Last 4 digits of account number Nonpriority Creditor's Name 7177 Crimson Ridge Dr St When was the debt incurred? Opened 8/19/15 Rockford, IL 61107 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

Other. Specify

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Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Rockford Health System Rmh ☐ Yes

Debtor	Sofia A. Ochoa	Document Page 3	0 of 5	55 number (if know))	
4.1	Rockford Mercantile	Last 4 digits of account number	6388			\$966.00
	Nonpriority Creditor's Name Po Box 5847	When was the debt incurred?	Oper	ned 3/05/16		
-	Rockford, IL 61125 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check	all that apply		
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	_ ,	Type of NONPRIORITY unsecure	d claim:			
	At least one of the debtors and another	☐ Student loans				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepreport as priority claims	aration ag	reement or divo	orce that you did not	
	■ No	Debts to pension or profit-shari	ng plans.	and other simila	ur debts	
	□ Yes	Other. Specify Rockford	•			
4.1	Rockford Mercantile	Last 4 digits of account number	3595			\$319.00
	Nonpriority Creditor's Name Po Box 5847 Rockford, IL 61125	When was the debt incurred?	Oper	ned 2/19/16		
=	Number Street City State Zlp Code	As of the date you file, the claim	is: Check	all that apply		
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt	Obligations arising out of a sep-	aration ag	reement or divo	orce that you did not	
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharing	•			
	Yes	Other. Specify Rockford	lealth S	3ystem Rml	<u> </u>	
Part 3:	List Others to Be Notified About a Deb	ot That You Already Listed				
is tryir have n	is page only if you have others to be notified a ng to collect from you for a debt you owe to so nore than one creditor for any of the debts tha d for any debts in Parts 1 or 2, do not fill out o	meone else, list the original creditor in you listed in Parts 1 or 2, list the add	n Parts 1	or 2, then list t	he collection agency here.	Similarly, if you
		On which entry in Part 1 or Part 2 did you	list the o	riginal creditor?		
		Line 4.14 of (<i>Check one):</i>	Part 1:	Creditors with P	riority Unsecured Claims	
	& Financial Responsibility 5. Dirksen Parkway		Part 2:	Creditors with N	Ionpriority Unsecured Claims	
	ifield, IL 62723					
		Last 4 digits of account number				
Part 4:	Add the Amounts for Each Type of Un	secured Claim				
	the amounts of certain types of unsecured clai f unsecured claim.	ms. This information is for statistical	eporting	purposes only	r. 28 U.S.C. §159. Add the ar	mounts for each
				To	otal Claim	
	6a. Domestic support obligations		6a.	\$	0.00	
	otal aims					
from Pa		you owe the government	6b.	\$	0.00	
	6c. Claims for death or personal	njury while you were intoxicated	6c.	\$	0.00	

				l otal Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00

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Debtor 1 Sofia A. Ochoa

					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	28,576.21
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$_	28,576.21

Fill in this information to identify your case:						
Debtor 1	Sofia A. Ochoa					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS			
Case number						
(if known)						

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Stateline Rental Properties 920 22nd St Rockford, IL 61108	Residential lease of 3036 Jacqueline Court, Apt. 6, Rockford, IL

		Docume	ent Page 33 d)エ 55	
Fill in this i	nformation to identify your				
Debtor 1	Sofia A. Ochoa				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	r) First Name	Middle Name	Last Name		
		NORTHERN DISTRICT			
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number	er				Charletthia is an
(ii kilowii)					Check if this is an amended filing
					-
	Form 106H				
Schedi	ule H: Your Cod	ebtors			12/15
■ No □ Yes 2. With Arizona ■ No. (□ Yes. 3. In Column line 2	2 again as a codebtor only i	u lived in a community pr Nevada, New Mexico, Pu use, or legal equivalent live cors. Do not include your f that person is a guaran	roperty state or territor erto Rico, Texas, Wash e with you at the time? spouse as a codebtor tor or cosigner. Make	ry? (Community property sington, and Wisconsin.) if your spouse is filing value you have listed the	states and territories include with you. List the person shown creditor on Schedule D (Official chedule E/F, or Schedule G to fill
	lumn 2.	,, c		,	
	Column 1: Your codebtor ame, Number, Street, City, State and Z	IP Code		Column 2: The credi	itor to whom you owe the debt
				_	a. app.y.
3.1	ame			_ ☐ Schedule D, line	
	anio			☐ Schedule E/F, line ☐ Schedule G, line	
N	lumber Street			— — — — — — — — — — — — — — — — — — —	
	ity	State	ZIP Code		
3.2				☐ Schedule D, line	
	ame			□ Schedule E/F, line	 e
				☐ Schedule G, line	- -
N	umber Street			_	
	ity	State	ZIP Code		

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Fill	in this information to identify your ca	356.				I				
	otor 1 Sofia A. Och									
	otor 2									
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS							
(If kr	se number nown)					☐ An ☐ A s		d filing	ostpetition cha ving date:	apter
	fficial Form 106l					MM	1 / DD/ Y	YYY		
S	chedule I: Your Inc	ome								12/1
spo atta Par	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	r spouse is not filing wi	th you, do not includ	e infor	matic	on about y	our spo	use. If more	space is nee	ded,
1.	Fill in your employment information.		Debtor 1			1	Debtor 2	or non-filing	spouse	
	If you have more than one job, attach a separate page with	Employment status	■ Employed			_	☐ Employed			
	information about additional	, .,	☐ Not employed			[☐ Not employed			
	employers.	Occupation								
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address	401 Harrison Ave Rockford, IL 6110							
		How long employed the	here? 4 years							_
Par	t 2: Give Details About Mor	nthly Income								
	mate monthly income as of the dause unless you are separated.	ate you file this form. If y	you have nothing to rep	oort for	any I	line, write \$	0 in the	space. Includ	e your non-fili	ng
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	for all e	emplo	oyers for th	at perso	n on the lines	below. If you	need
						For Debte	or 1	For Debtor		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	1,9	12.99	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	

1,912.99

N/A

Calculate gross Income. Add line 2 + line 3.

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Debtor 1		Sofia A. Ochoa				number (if known)					
					For	Debtor 1			Debtor filing s	2 or spouse	
	Cop	y line 4 here	4.		\$	1,912.99)	\$	9 0	N/A	-
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	ì.	\$	290.71		\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$	0.00	_	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c	: .	\$	133.91	_	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d	i.	\$_	0.00)	\$		N/A	-
	5e.	Insurance	5e) .	\$	288.06	;	\$		N/A	_
	5f.	Domestic support obligations	5f.		\$	0.00)	\$		N/A	_
	5g.	Union dues	5 g		\$	0.00		\$		N/A	_
	5h.	Other deductions. Specify:	5h	1.+	\$	0.00	<u> </u>	⊦\$		N/A	- .
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	712.68	<u> </u>	\$		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	1,200.31	_	\$		N/A	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0-		œ.			Φ.			
	8b.	monthly net income. Interest and dividends	8a 8b		\$_ \$	0.00		\$		N/A N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			\$_ \$	0.00	_	\$ \$		N/A	-
	8d.	Unemployment compensation	8d		<u>\$</u> _	0.00	_	\$		N/A	_
	8e.	Social Security	8e		\$_	0.00	_	\$		N/A	_
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Link benefits Pension or retirement income	e 8f. 8g		\$ _	348.00 0.00	_	\$ 		N/A N/A	-
	8h.	Other monthly income. Specify:	-	,. 1.+	<u> </u>	0.00	_	+ \$		N/A	_
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	3	\$	348.00	7	\$		N/A	_
10	Cal	sulate monthly income. Add line 7 . En . O	10.	Φ.		1,548.31 +	•		N/A	•	4 5 40 04
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Φ_		1,548.31 +	P _		N/A	= -	1,548.31
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your per friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depe		,			•	chedule 11.		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailes							12.	\$	1,548.31
13.	Do	you expect an increase or decrease within the year after you file this form	1?						ι	Combi	ned y income
		No.									

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EHIL	in thic informe	tion to identify yo	ur caea:			1		
Deb	tor 1	Sofia A. Och	oa				eck if this is: An amended filing	
Deb	tor 2						ū	wing postpetition chapter
(Spo	ouse, if filing)					_	13 expenses as of	the following date:
Unit	ed States Bankr	uptcy Court for the:	NORTH	HERN DISTRICT OF ILLIN	IOIS		MM / DD / YYYY	
1	e number nown)							
Of	fficial Fo	rm 106J				-		
		J: Your I	Exper	ises				12/15
Be info	as complete a ormation. If m nber (if know	and accurate as	possible eded, atta y questio	. If two married people a ch another sheet to this				or supplying correct
1.	Is this a joir		noiu					
	■ No. Go to		n a conar	ate household?				
	□ res. Doe		ii a sepai	ate nousenoid:				
			t file Offici	al Form 106J-2, Expenses	s for Separate House	ehold of De	ebtor 2.	
2.		e dependents?	_	•	•			
۷.	•	•	☐ No					
	Do not list Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	D	41						□ No
	Do not state dependents				Daughter		1	■ Yes
							_	□ No
					Son		6	Yes
								□ No
								Yes
								□ No
_	D	anaaa inaliida						☐ Yes
3.		enses include f people other th	nan	No				
		d your depender		Yes				
Dor	t O: Eatim	oto Vous Ongois	aa Manth	ly Eynanaa				
Est exp	imate your ex		our bankr	uptcy filing date unless y				apter 13 case to report of the form and fill in the
the	ude expense value of such ficial Form 10	n assistance and	non-cash d have ind	government assistance cluded it on <i>Schedule I:</i>	if you know Your Income		Your exp	penses
(Oil	iolai i Ullii 10	···. <i>)</i>						
4.		or home owners and any rent for the		ses for your residence. For lot.	nclude first mortgag	e 4.	\$	675.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		rty, homeowner's				4b.	\$	0.00
				upkeep expenses		4c.		50.00
_		owner's associati			ma aguitu la aaa	4d.		0.00
5.	Additional r	nortaade bayme	ents for vo	our residence, such as ho	ime equity loans	5.	D	0.00

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Debtor 1 Sofia	A. Ochoa	Case num	ber (if known)	
6. Utilities:				
	ity, heat, natural gas	6a.	\$	100.00
	sewer, garbage collection	6b.	\$	0.00
	one, cell phone, Internet, satellite, and cable services	6c.	·	90.00
6d. Other. S		6d.	·	0.00
	usekeeping supplies	7.	·	450.00
	d children's education costs	8.	\$	
		o. 9.	·	70.00
	ndry, and dry cleaning		\$	150.00
	e products and services	10.	·	50.00
	dental expenses	11.	\$	0.00
	on. Include gas, maintenance, bus or train fare. e car payments.	12.	\$	400.00
	t, clubs, recreation, newspapers, magazines, and books	13.	·	20.00
	ntributions and religious donations	14.	•	0.00
i. Charitable co 5. Insurance.	minibulions and religious donations	14.	Ψ	0.00
	insurance deducted from your pay or included in lines 4 or 20.			
15a. Life inst		15a.	\$	0.00
15b. Health i		15b.		0.00
15c. Vehicle		15b.		66.00
		15d.		
	isurance. Specify:	150.	Ψ	0.00
Specify:	include taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
	r lease payments:		Ψ	0.00
	ments for Vehicle 1	17a.	\$	0.00
	ments for Vehicle 2	17b.	·	0.00
		17b.	•	
17c. Other. S			·	0.00
17d. Other. S	· ·	17d.	>	0.00
	ts of alimony, maintenance, and support that you did not report as m your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).		\$	0.00
	nts you make to support others who do not live with you.		\$	0.00
Specify:	into you make to support others who do not live with you.	19.	Ψ	0.00
	operty expenses not included in lines 4 or 5 of this form or on Scho		our Income	
	ges on other property	20a.		0.00
20b. Real es		20b.		0.00
	y, homeowner's, or renter's insurance	20c.		0.00
			•	
	ance, repair, and upkeep expenses	20d.		0.00
	wner's association or condominium dues	20e.	·	0.00
. Other: Specify	/: 	21.	+\$	0.00
2. Calculate voi	ir monthly expenses			
22a. Add lines	• •		\$	2,121.00
	22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	_,
				0.404.00
ZZC. Add line i	22a and 22b. The result is your monthly expenses.		\$	2,121.00
3. Calculate you	ır monthly net income.		L	
-	ne 12 (your combined monthly income) from Schedule I.	23a.	\$	1,548.31
	our monthly expenses from line 22c above.	23b.		2,121.00
	, . 1		·	2,121.00
23c. Subtrac	t your monthly expenses from your monthly income.			
	ult is your <i>monthly net income</i> .	23c.	\$	-572.69
	•			
	ct an increase or decrease in your expenses within the year after you			
	you expect to finish paying for your car loan within the year or do you expect you	r mortgage p	payment to increase	e or decrease because o
	he terms of your mortgage?			
■ No.				
☐ Yes.	Explain here:			

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Fill in this inform	nation to identify your	case:			
Debtor 1	Sofia A. Ochoa				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official Form	<u> 106Dec</u>				
Declarati	ion About a	n Individual	Debtor's Sche	dules	12/15
If two married pe	ople are filing togethe	r, both are equally respoi	nsible for supplying correct in	nformation.	
Va	. fa	la banlınında, aabadıdaa	an amandad ashadulas Mala	in n a falaa atatamant	
			or amended schedules. Mak ruptcy case can result in fine		
	3 U.S.C. §§ 152, 1341, 1		,	, , , , , , , , , , , , , , , , , , ,	р
Sign	Below				
Did you pay	or agree to pay some	one who is NOT an attori	ney to help you fill out bankro	uptcy forms?	
■ No					
_					
☐ Yes. N	lame of person				Petition Preparer's Notice, Signature (Official Form 119)
				Deciaration, and S	ingriature (Official Form 119)
	ty of perjury, I declare true and correct.	that I have read the sum	mary and schedules filed with	h this declaration and	
X /s/ Sofia	a A. Ochoa		Х		
	. Ochoa		Signature of Debto	or 2	
Signatur	e of Debtor 1		-		

Date

Date June 9, 2017

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 Married Not married No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address:						
Debtor 2 (Reaceut Mind) First Name	Fill in	this information to identify	our case:			
Debtor 2 Separes It first First Name Middle Name Lack Name Lack Name Check if this is an amended filling	Debto	r 1 Sofia A. Ocho	oa			
Check if this is an amended filing	Dahta		Middle Name	Last Name		
Case number Check it this is an amended filling Check it this is an amended filling Official Form 107 Statement of Financial Affairs for Individuals Filling for Bankruptcy 4/11 Be as complete and accurret as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known), nawer every question. Parts: Give Details About Your Marital Status and Where You Lived Before What is your current marital status? Married Not		· =	Middle Name	Last Name		
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married Not married Not married Not married Not married Details About Your Marital Status and Where You Lived Before 1317 Magnolia Street Rockford, IL Prom 10: Same as Debtor 1 Rockford, IL Same as Debtor 1 From 10: Same as Debtor 1	United	d States Bankruptcy Court for t	he: NORTHERN DISTRICT (OF ILLINOIS		
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 4/10 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not marrie	0					
Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before					_	
information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before			al Affairs for Individ	duals Filing for B	ankruptcy	4/10
Not married No	inform numbe	ation. If more space is needer (if known). Answer every of Give Details About Your	led, attach a separate sheet to question. Marital Status and Where You	this form. On the top of an		
Not married No	_	1 Marriad				
2. During the last 3 years, have you lived anywhere other than where you live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 lived there Debtor 2 Prior Address: lived there Iived there		-				
No	. D		very lived annual ere other than	where very live new?		
Pebtor 1 Prior Address: Dates Debtor 1 lived there 1317 Magnolia Street Rockford, IL Debtor 2 Prior Address: Dates Debtor 1 lived there 1317 Magnolia Street Rockford, IL Prom-To: 2014 to 2015 Dates Debtor 1 Same as Debtor 1 From-To: 2014 to 2015 Dates Debtor 2 lived there Prom-To: 2014 to 2015 Dates Debtor 2 lived there Prom-To: 2014 to 2015 Dates Debtor 2 lived there Prom-To: 2014 to 2015 Dates Debtor 2 lived there Prom-To: 2014 to 2015 Dates Debtor 1 Same as Debtor 1 From-To: Dates Debtor 2 lived there Same as Debtor 1 From-To: Dates Debtor 1 From-To: Dates Debtor 2 Same as Debtor 1 From-To: Dates Debtor 2 Same as Debtor 1 From-To: Dates Debtor 1 From-To: Dates Debtor 2 Sources of Income Check all that apply. Debtor 1 Sources of Income Check all that apply. Dates Debtor 2 Sources of Income Check all that apply. Dates Debtor 2 Sources of Income Check all that apply. Dates Debtor 2 Sources of Income Check all that apply. Dates Debtor 2 Sources of Income Check all that apply. Dates Debtor 2 Sources of Income Check all that apply. Dates Debtor 2 Sources of Income Check all that apply. Dates Debtor 2 Sources of Income Check all that apply. Dates Debtor 2 Sources of Income Check all that apply. Dates Debtor 2 Sources of Income Check all that apply. Dates Debtor 2 Sources of Income Check all that apply. Dates Debtor 2 Sources of Income Check all that apply. Dates Debtor 2 Sources of Income Check all that apply. Dates Debtor 2 Sources of Income Check all that apply. Dates Debtor 2 Sources of Income Check all that apply. Dates Debtor 2 Sources of Income Check all that apply. Dates Debtor 2 Sources of Income Check all that apply. Dates Debtor 3 Dates Debtor 4 Sources of Income Check all that apply. Dates Debtor 3 Dates Debtor 4 Sources of Income Check all that apply. Dates Debtor 3 Dates Debtor 4 Sources of Income Check all that apply. Dates Debtor 3 Dates Debtor 4 Sources of Income Check all that apply. Dates Debtor 4 Sources of Income Check all that apply	2. D	uring the last 3 years, have y	ou lived anywhere other than	where you live now?		
Debtor 1 Prior Address: Dates Debtor 1 Name Debtor 2 Prior Address: Dates Debtor 2 Name Debtor 2 Name Na		•				
lived there 1317 Magnolia Street From-To: Same as Debtor 1 From-To: Same as Debtor 1 Same as Debtor 1 From-To: Same as Debtor 1 Same as Debtor 1 From-To: Same as Debtor 1 Same as Debtor 2 Same as Debtor 1 Same as Debtor 2 Same as Debtor 1 Same		Yes. List all of the places y	ou lived in the last 3 years. Do no	ot include where you live nov	V.	
Rockford, IL 2014 to 2015 Ro	C	Debtor 1 Prior Address:		Debtor 2 Prior Ac	Idress:	
No Ves. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Ves. Fill in the details. Debtor 1 Sources of income Check all that apply. From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips				☐ Same as Debtor	1	
Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No No Pebtor 1 Sources of income Check all that apply. From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Pebtor 2 Sources of income (before deductions and exclusions) Sources of income Check all that apply. Wages, commissions, bonuses, tips Pages, commissions, bonuses, tips	states	and territories include Arizona, No Yes. Make sure you fill out	California, Idaho, Louisiana, Ne Schedule H: Your Codebtors (Of	vada, New Mexico, Puerto R		
Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. From January 1 of current year until the date you filed for bankruptcy: Debtor 2 Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) \$9,912.65 Debtor 2 Sources of income (before deductions and exclusions) Wages, commissions, bonuses, tips	Fi	ill in the total amount of income	e you received from all jobs and a	all businesses, including part	-time activities.	ndar years?
Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Debtor 2 Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) Sources of income (before deductions and exclusions) Wages, commissions, bonuses, tips] No				
Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) \$9,912.65 Doubt it which is		Yes. Fill in the details.				
Check all that apply. (before deductions and exclusions) Check all that apply. (before deductions and exclusions) Check all that apply. (before deductions and exclusions) Sp,912.65 bonuses, tips Check all that apply. (before deductions and exclusions) The description of the deductions and exclusions and exclusions. Check all that apply. (before deductions and exclusions)			Debtor 1		Debtor 2	
the date you filed for bankruptcy: bonuses, tips bonuses, tips				(before deductions and		(before deductions
☐ Operating a business ☐ Operating a business			wages, commissions,	\$9,912.65	=	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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			Debtor 1		Debtor 2		
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	or last caler anuary 1 to	ndar year: December 31, 2016)	■ Wages, commissions, bonuses, tips	\$19,109.00	☐ Wages, combonuses, tips	missions,	
			☐ Operating a business		☐ Operating a	business	
		dar year before that: December 31, 2015)	■ Wages, commissions, bonuses, tips	\$15,167.00	☐ Wages, combonuses, tips	missions,	
			☐ Operating a business		☐ Operating a	business	
- -	Include in and other winnings. List each	come regardless of who public benefit payment If you are filing a joint o	me during this year or the two ether that income is taxable. Exa s; pensions; rental income; inter ease and you have income that y accome from each source separa	amples of other income are a rest; dividends; money collec- you received together, list it of	alimony; child suppoted from lawsuits; only once under De	royalties; and ebtor 1.	
			Debtor 1		Debtor 2		
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	art 3: Lis	t Certain Payments Yo	ou Made Before You Filed for	Bankruptcy			
6.	Are eithe ☐ No.	Neither Debtor 1 no	2's debts primarily consumer r Debtor 2 has primarily consu r a personal, family, or househo	<mark>ımer debts.</mark> Consumer debt	's are defined in 11	U.S.C. § 10	1(8) as "incurred by an
		☐ No. Go to line ☐ Yes List below paid that not include	efore you filed for bankruptcy, di e 7. w each creditor to whom you pai creditor. Do not include paymer de payments to an attorney for tl ent on 4/01/19 and every 3 year	id a total of \$6,425* or more nts for domestic support obliq his bankruptcy case.	in one or more pay gations, such as ch	ments and thild support a	nd alimony. Also, do
	Yes.		2 or both have primarily consulter or some primarily consulter or bankruptcy, di		al of \$600 or more?	,	
		□ No. Go to line	e 7.				
		include p	weach creditor to whom you pai ayments for domestic support o for this bankruptcy case.				
	Creditor	's Name and Address	Dates of payme	ent Total amount paid	Amount you still owe	Was this p	payment for
	920 22n	e Rental Properties d St rd, IL 61108	March 2017	\$3,000.00	\$0.00	☐ Mortgag ☐ Car ☐ Credit C ☐ Loan Re	Card

☐ Suppliers or vendors ■ Other Past due rent

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Deb	Sofia A. Ochoa		Cas	se number (if known)		
	Within 1 year before you filed for bankrup Insiders include your relatives; any general p of which you are an officer, director, person in a business you operate as a sole proprietor. alimony.	artners; relatives of any gent control, or owner of 20%	eneral partners; partners or more of their votin	erships of which yog g securities; and a	ou are a genera ny managing a	al partner; corporations gent, including one for
	■ No □ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or continuous payments.		nyments or transfer a	any property on a	ccount of a de	ebt that benefited an
	■ No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name
Part	t 4: Identify Legal Actions, Repossessio	ons, and Foreclosures				
	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
	Stateline Rental Properties v. Sofia OchoaVillarruel 2016-LM-2112	Forcible Entry & Detainer action	Winnebago Co 400 W. State S Rockford, IL 6	treet	☐ Pending ☐ On appe ☐ Conclud	al
	Pekin Insurance Co. v. Sofia	Litigation	Winnebago Co		☐ Pending	
	Ochoa-Villarruel		400 W. State S		☐ On appe	al
	2011-AR-744		Rockford, IL 6	1101	■ Conclud	ed
					Wage Gar	nishment
	Within 1 year before you filed for bankrups Check all that apply and fill in the details below. No. Go to line 11.		perty repossessed, 1	oreclosed, garnis	shed, attached	d, seized, or levied?
	Yes. Fill in the information below.	Describe the Bresset		Deta		Value of the
	Creditor Name and Address	Describe the Property Explain what happene		Date		Value of the property
	Pekin Insurance	Weekly wages	ou .	Ong	oina	Unknown
	c/o Attorney Russell Barnett 400 S County Farm Rd #200 Wheaton, IL 60187	☐ Property was repose ☐ Property was forecle		9	- ·- -	J

☐ Property was attached, seized or levied.

☐ Property was foreclosed. ■ Property was garnished.

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Debtor 1	Sofia A Ochoa		Case number (if known)	

11.	Within 90 days before you filed for bankr accounts or refuse to make a payment be No Yes. Fill in the details.		did any creditor, including a bank or financial in you owed a debt?	stitution, set off any a	amounts from your
	Creditor Name and Address	De	scribe the action the creditor took	Date action was taken	Amount
12.	Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or ■ No □ Yes		ras any of your property in the possession of an er official?	assignee for the bene	efit of creditors, a
Par	t 5: List Certain Gifts and Contribution	s			
			did you give any gifts with a total value of more t	than \$600 per person	?
	Gifts with a total value of more than \$60 per person	0	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift or co		did you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code		Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankru or gambling?	ptcy or	since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster,
	■ No □ Yes. Fill in the details.				
	Describe the property you lost and how the loss occurred	Include	ibe any insurance coverage for the loss at the amount that insurance has paid. List pending not claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers	6			
16.	consulted about seeking bankruptcy or p	prepari	id you or anyone else acting on your behalf pay ng a bankruptcy petition? rs, or credit counseling agencies for services require		rty to anyone you
	□ No■ Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	'ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	BARRICK SWITZER LAW OFFICE 6833 Stalter Drive Rockford, IL 61108		Attorney Fees/FilingFee/Credit Report Charge	May 4, 2017	\$1,023.00

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Debtor 1 Sofia A. Ochoa

17.	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you No Yes. Fill in the details.	rs or to make payments			transfer any prope	rty to anyone who
	Person Who Was Paid Address	Description and v transferred	alue of any prope	rty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrupto transferred in the ordinary course of your but Include both outright transfers and transfers mainclude gifts and transfers that you have already No Yes. Fill in the details.	usiness or financial affa ade as security (such as t	iirs? he granting of a sec			
	Person Who Received Transfer Address	Description and v property transferr			ny property or received or debts hange	Date transfer was made
19.	Person's relationship to you Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro ■ No □ Yes. Fill in the details.		y property to a se	lf-settled trus	st or similar device	of which you are a
	Name of trust	Description and v	alue of the proper	rty transferre	d	Date Transfer was made
	List of Certain Financial Accounts, Ins Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, assoc No Yes. Fill in the details.	y, were any financial ac	counts or instrum	ents held in		,
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	clos	e account was sed, sold, ved, or asferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 y cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	who else had acc Address (Number, State and ZIP Code)	ess to it? De	safe deposit		Do you still have it?
22.	Have you stored property in a storage unit o No Yes. Fill in the details.		home within 1 ye	ar before you	u filed for bankrupto	cy?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, State and ZIP Code)		escribe the c	ontents	Do you still have it?

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Debtor 1 Sofia A. Ochoa

Par	t 9: Identify Property You Hold or Control for S	someone Else			
23.	Do you hold or control any property that someor for someone.	ne else owns? Include any proper	ty yo	ou borrowed from, are storing for	, or hold in trust
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	scribe the property	Value
Par	t 10: Give Details About Environmental Information	tion			
For	the purpose of Part 10, the following definitions a	apply:			
	Environmental law means any federal, state, or letoxic substances, wastes, or material into the air regulations controlling the cleanup of these substances.	r, land, soil, surface water, ground	_	•	
	Site means any location, facility, or property as of to own, operate, or utilize it, including disposal s	-	law,	whether you now own, operate, o	or utilize it or used
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, or si		wa:	ste, hazardous substance, toxic s	ubstance,
Rep	ort all notices, releases, and proceedings that you	u know about, regardless of wher	1 the	ey occurred.	
24.	Has any governmental unit notified you that you	may be liable or potentially liable	unc	der or in violation of an environme	ental law?
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any r	release of hazardous material?			
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or administ	trative proceeding under any envi	ronr	mental law? Include settlements a	nd orders.
	■ No □ Yes. Fill in the details.				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case
Par	t 11: Give Details About Your Business or Conn	ections to Any Business			
27.	Within 4 years before you filed for bankruptcy, di	id you own a business or have an	ıy of	the following connections to any	business?
	☐ A sole proprietor or self-employed in a tr	ade, profession, or other activity,	eith	er full-time or part-time	
	☐ A member of a limited liability company ((LLC) or limited liability partnersh	ip (L	LP)	
	☐ A partner in a partnership				
	☐ An officer, director, or managing executi	ve of a corporation			
	☐ An owner of at least 5% of the voting or e	equity securities of a corporation			

Case 17-81386 Doc 1 Filed 06/09/17 Entered 06/09/17 10:16:37 Page 45 of 55 Case number (if known) Document Debtor 1 Sofia A. Ochoa No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. **Date Issued** Name **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Sofia A. Ochoa	
Sofia A. Ochoa	Signature of Debtor 2
Signature of Debtor 1	
Date June 9, 2017	Date
Did you attach additional p	ages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)
■ No	
Yes	
Did you pay or agree to pay	someone who is not an attorney to help you fill out bankruptcy forms?
■ No	
☐ Yes. Name of Person	. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debtor 1	Sofia A. Ochoa			
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
f known)				☐ Check if this is ar amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	<u>_</u>
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debto	r1 <u>Sof</u>	fia A. Ochoa	Case number (if known)		
prop	ne: scription coerty uring deb		 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	☐ Yes	
in the i	y unexpi informati	ion below. Do not list real estate le	Leases ou listed in Schedule G: Executory Contracts and Unexpired eases. Unexpired leases are leases that are still in effect; the value lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2)	lease period has not yet ended.	
Descr	ibe your	unexpired personal property lease	es	Will the lease be assumed?	
	r's name: ption of le rty:			□ No □ Yes	
	r's name: ption of le rty:			□ No □ Yes	
	r's name: ption of le rty:			□ No □ Yes	
	r's name: option of le rty:			□ No □ Yes	
	r's name: ption of le rty:			□ No □ Yes	
	r's name: ption of le			□ No □ Yes	
	r's name: ption of le rty:			□ No	
Part 3:	penalty of	Below of perjury, I declare that I have indi	icated my intention about any property of my estate that sec		
	•	A. Ochoa	x		
_	Sofia A. Signature	Ochoa of Debtor 1	Signature of Debtor 2		
D	ate	June 9. 2017	Date		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

C	hapter 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-81386 Doc 1 Filed 06/09/17 Entered 06/09/17 10:16:37 Desc Main Document Page 52 of 55

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Sofia A. Ochoa		Case No) .	
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMP	PENSATION OF ATTOR	RNEY FOR D	DEBTOR(S)	
(Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the for the rendered on behalf of the debtor(s) in contemplation	filing of the petition in bankruptcy,	or agreed to be pa	id to me, for services	
	For legal services, I have agreed to accept		\$	665.00	
	Prior to the filing of this statement I have receive	ed	\$	665.00	
				0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed co	ompensation with any other person to	unless they are me	mbers and associates	s of my law firm.
	☐ I have agreed to share the above-disclosed compet copy of the agreement, together with a list of the				y law firm. A
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
l o	a. Analysis of the debtor's financial situation, and reb. Preparation and filing of any petition, schedules, sc. Representation of the debtor at the meeting of cred. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications of the secured creditors to reaffirmation agreements and applications.	statement of affairs and plan which ditors and confirmation hearing, an to reduce to market value; exections as needed; preparation	may be required; d any adjourned h	earings thereof;	d filing of
б. I	By agreement with the debtor(s), the above-disclosed Representation of the debtors in any any other adversary proceeding.			ces, relief from s	tay actions or
		CERTIFICATION			
	I certify that the foregoing is a complete statement of ankruptcy proceeding.	any agreement or arrangement for	payment to me for	representation of th	e debtor(s) in
Jı	une 9, 2017	/s/ Jason H. Rock			
Date		Jason H. Rock			
		Signature of Attorney BARRICK SWITZE		<u> </u>	
		6833 Stalter Drive)	_	
		Rockford, IL 6110	8		
		Name of law firm			

United States Bankruptcy Court Northern District of Illinois

In re	Sofia A. Ochoa		Case No.		
		Debtor(s)	Chapter 7		
	VE	RIFICATION OF CREDITOR N	IATRIX		
		Number of	Creditors:	12	
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.				
Date:	June 9, 2017	/s/ Sofia A. Ochoa Sofia A. Ochoa Signature of Debtor			

American Profit Recovery 34505 W. 12 Mile Road, Suite 333 Farmington, MI 48331

Convergence Acquisitions, LLC 5109 S. Broadband Lane Sioux Falls, SD 57108-7960

Convergent 800 Sw 39th St Renton, WA 98057

Convergent Healthcare 121 Ne Jefferson St Peoria, IL 61602

Creditors Protection 206 W State St Rockford, IL 61101

Debt Rec Sol 900 Merchants Concourse Westbury, NY 11590

Erc 8014 Bayberry Rd Jacksonville, FL 32256

Mutual Mgmt 7177 Crimson Ridge Dr St Rockford, IL 61107

Office of the Secretary of State Safety & Financial Responsibility 2701 S. Dirksen Parkway Springfield, IL 62723

Pekin Insurance Co. c/o Attorney Russell Barnett 400 South County Farm Road, Ste.200 Wheaton, IL 60187

Rockford Mercantile Po Box 5847 Rockford, IL 61125 Stateline Rental Properties 920 22nd St Rockford, IL 61108